

H. B. 4289

(By Delegates Perdue, Fleischauer, Morgan,
Ellington, Staggers and Swartzmiller)

[Introduced January 24, 2014; referred to the
Committee on Health and Human Resources then Government
Organization.]

A BILL to amend and reenact §30-3-16 and §30-3-16a of the Code of
West Virginia, 1931, as amended, all relating to the
licensure, supervision and regulation of physician assistants
by the West Virginia Board of Medicine; defining term;
providing for rule-making authority; setting forth licensing
requirements; providing for a temporary license; providing for
a practice agreement; setting out practice agreement
requirements; setting forth requirements for a supervising
physician; setting forth requirements for an alternate
supervisory physician; providing for prescriptive authority
for a physician assistants; setting limits on the number of
fulltime physician assistants which may be supervised by a
single supervisory physician; providing for emergency practice
provisions, and providing for a summer camp license.

Be it enacted by the Legislature of West Virginia:

1 That §30-3-16 and §30-3-16a of the Code of West Virginia,
2 1931, as amended, be amended and reenacted, all to read as follows:

3 **ARTICLE 3. WEST VIRGINIA MEDICAL PRACTICE ACT.**

4 **§30-3-16. Physician assistants; definitions; Board of Medicine**
5 **rules; annual report; licensure; temporary license;**
6 **license renewal; practice agreement required;**
7 **revocation or suspension of licensure;**
8 **responsibilities of supervising physician; legal**
9 **responsibility for physician assistants; reporting by**
10 **health care facilities; identification; limitations**
11 **on employment and duties; fees; continuing education;**
12 **unlawful representation of physician assistant as a**
13 **physician; criminal penalties.**

14 (a) As used in this section:

15 (1) "Advance duties" means medical acts that require
16 additional training beyond the basic education program training
17 required for licensure as a physician assistant.

18 (2) "Alternate supervising physician" means one or more
19 physicians licensed by the board and designated by the supervising
20 physician to provide supervision of a physician assistant in
21 accordance with a practice agreement authorized by the board.

22 (3) "Approved program" means an educational program for
23 physician assistants approved and accredited by the Accreditation

1 Review Commission on Education for the Physician Assistant or its
2 successor. Prior to 2001, approval and accreditation would have
3 been by either the Committee on Allied health Education and
4 Accreditation or the Accreditation Review Commission on Education
5 for the Physician Assistant.

6 (4) "Board" means the West Virginia Board of Medicine.

7 (5) "Chronic condition" is a condition which lasts three
8 months or more, generally cannot be prevented by vaccines, can be
9 controlled but not cured by medication and does not generally
10 disappear. These conditions include, but are not limited to,
11 arthritis, asthma, cardiovascular disease, cancer, diabetes,
12 epilepsy and seizures and obesity.

13 (6) "Health care facility" means any licensed hospital,
14 nursing home, extended care facility, state health or mental
15 institution, clinic or physician's office.

16 (7) "Hospital" means a facility licensed pursuant to article
17 five-b of chapter sixteen of this code and any acute care facility
18 operated by the state government that primarily provides inpatient
19 diagnostic, treatment or rehabilitative services to injured,
20 disabled or sick persons under the supervision of physicians and
21 includes psychiatric hospitals.

22 (8) "Physician assistant" means a health care professional who
23 meets the qualifications set forth in this article and is licensed
24 pursuant to this article to practice medicine with physician

1 supervision.

2 (9) "Practice Agreement" means a document that is executed
3 between a supervision physician and a physician assistant and is
4 filed with and approved by the board. Practice agreements include,
5 but are not limited to: a description of the qualifications of the
6 supervising physician and physician assistant, a description of the
7 settings in which the physician will practice, a description of the
8 continuous physician supervision mechanisms that are reasonable and
9 appropriate for the practice setting and the experience and training
10 of the physician assistant, a description of the delegated medical
11 acts that are within the supervision physicians's scope of practice,
12 an attestation that all medical acts to be delegated to the
13 physician assistant are within the scope of the supervising
14 physician's scope of practice and are appropriate to the physician
15 assistant's education, training and level of competence and other
16 attestations as set forth by the board by rules promulgated pursuant
17 to subsection (b) of this section.

18 (10) "Supervising physician" means a doctor of medicine or
19 podiatry permanently and fully licensed by the board without
20 restriction or limitation who supervises physician assistants.

21 (11) "Supervision" means overseeing the activities of, and
22 accepting responsibility for, the medical services rendered by a
23 physician assistant. Constant physical presence of the supervising
24 physician is not required as long as the supervising physician and

1 physician assistant are, or can be, easily in contact with one
2 another by telecommunication. Supervision does not require the
3 personal presence of the supervising physician at the place or
4 places where services are rendered if the physician assistant's
5 normal place of employer is the same premises as the supervising
6 physician.

7 (b) The board shall promulgate rules, including emergency
8 rules, pursuant to article three, chapter twenty-nine-a of this code
9 to ensure conformity with this section, governing the extent to
10 which physician assistants may function in this state. The rules
11 shall provide that the physician assistant is limited to the
12 performance of those services for which he or she is trained and
13 that he or she performs only with the supervision and control of a
14 physician or podiatrist permanently licensed by the board. In
15 promulgating the rules, the board shall allow the physician
16 assistant to perform those procedures and examinations submitted to
17 it in the practice agreement required by this section. Physician
18 assistants may pronounce death in accordance with the rules. The
19 board shall compile and publish an annual report that includes a
20 list of currently licensed physician assistants and their
21 supervising physician(s) and location(s) in the state.

22 (c) The board shall issue a license to practice as a physician
23 assistant under the supervision of a physician or podiatrist
24 licensed by the board to any person who:

- 1 (1) Files a complete application;
- 2 (2) Pays the necessary fee as set by the board;
- 3 (3) Demonstrates to the board's satisfaction that he or she:
 - 4 (A) Obtained a baccalaureate or master's degree from an
5 accredited program of instruction for physician assistants; or
 - 6 (B) Prior to July 1, 1994, graduated from an approved program
7 of instruction in primary health care or surgery; or
 - 8 (C) Prior to July 1, 1983, was certified by the board as a
9 physician assistant then classified as "Type B".
- 10 (4) Has passed the Physician Assistant National Certifying
11 Examination administered by the National Commission on Certification
12 of Physician Assistants and has maintained a current certification
13 by that commission;
- 14 (5) Is mentally and physically able to engage safely in
15 practice as a physician assistant;
- 16 (6) Has no physician assistant licensure, certification or
17 registration in any jurisdiction currently suspended or revoked;
- 18 (7) Has no professional licensure, certification or
19 registration in any jurisdiction under current discipline, or is
20 subject to any limitation or restriction unless the board is aware
21 of the discipline, limitation or restriction and agrees to
22 licensure;
- 23 (8) Is of good moral character; and
- 24 (9) Submits to the board any further information the board

1 deems necessary to evaluate the applicant's qualifications.

2 (d) The board may grant a temporary license to an individual
3 applying for licensure under this section if the individual meets
4 all of the qualifications for licensure but is awaiting the next
5 scheduled meeting of the board for action upon his or her
6 application.

7 (e) If a physician assistant fails a recertification
8 examination of the National Commission on Certification of Physician
9 Assistants and is no longer certified, the physician assistant
10 shall:

11 (1) Immediately notify his or her supervising physician or
12 physicians and the board in writing; and

13 (2) Immediately cease practicing.

14 The license shall terminate automatically and the physician
15 assistant is not eligible for reinstatement until he or she has
16 obtained a passing score on the examination.

17 (f) The board may deny an application for license as a
18 physician assistant in this state and may, after providing the
19 licensee an opportunity for hearing, discipline a physician
20 assistant licensed by the board who has been adjudged by the board
21 a unqualified due to any of the reasons set forth in this article
22 or in legislative rules regarding physician assistant licensure and
23 discipline promulgated by the board.

24 (g) All hearing and process related to physician assistant

1 licensure and discipline shall be in accord with the process and
2 procedures set forth in section fourteen of this article.

3 (h) The board may impose and discipline, restrictions and
4 limitations, or both, upon the license of any physician assistant
5 which it is authorized to impose upon physicians and podiatrists.

6 (i) A physician assistant may not practice independent of a
7 supervising physician. Before a supervising physician may delegate
8 medical acts to a licensed physician assistant, and before a
9 physician assistant may practice as a physician assistant, the
10 supervising physician and the physician assistant must file a
11 completed practice agreement with the board in the form and manner
12 prescribed by the board with the necessary fee. The fee shall be
13 established by rule of the board. Once approved the board shall
14 issue written authorization for the physician assistant to commence
15 practicing as a physician assistant pursuant to the practice
16 agreement. Alternate supervising physician(s) shall be designated
17 as part of the practice agreement.

18 (j) A physician applying to the board to supervise a physician
19 assistant shall affirm that the range of medical services set forth
20 in the physician assistant's practice agreement are consistent with
21 the skills and training of the supervising physician and the
22 physician assistant. Activities shall be delegated to physician
23 assistants in a manner consistent with sound medical practice and
24 the protection of the health and safety of the patient and

1 consistent with the practice agreement filed with the board.

2 (k) The board may decline to authorize a physician assistant
3 to commence practicing pursuant to a practice agreement filed with
4 the board if it determines that the practice agreement fails to meet
5 the requirements established by the board. In its consideration of
6 any practice agreement which proposes the delegation of advanced
7 duties, the board may request additional information from the
8 supervising physician and the physician assistant, or both, to
9 evaluate the delegation of the advanced duties. The board may
10 decline to authorize an advanced duty incorporated into a practice
11 agreement if it determines that the physician assistant is unable
12 to perform the proposed delegated duties safely.

13 (l) Practice agreements which include advanced duties which are
14 to be performed in a hospital shall be approved if accompanied by
15 certification that:

16 (1) A physician, with credentials that have been reviewed by
17 the hospital or ambulatory surgical facility as a condition of
18 employment as an independent contractor or as a member of the
19 medical staff, supervises the physician assistant;

20 (2) The physician assistant has credentials that have been
21 reviewed by the hospital or ambulatory surgical facility as a
22 condition of employment as an independent contractor or as a member
23 of the medical staff; and

24 (3) Each advanced duty to be delegated to the physician

1 assistant is reviewed and approved within a process approved by the
2 governing body of the health care facility before the physician
3 assistant performs the advanced duties.

4 (m) If the board declines to approve a practice agreement or
5 any proposed delegated act incorporated therein, the board shall
6 provide the supervising physician and the physician assistant with
7 written notice of the disapproval. A physician assistant who
8 receives notice that the board has disapproved a practice agreement
9 or an advanced duty under the practice agreement may not practice
10 under the agreement or perform the disapproved function.

11 (n) A physician licensed by the West Virginia Board of Medicine
12 may supervise a physician assistant:

13 (1) As a supervising physician in accordance with a practice
14 agreement authorized by the board;

15 (2) As an alternate supervising physician if:

16 (A) The alternate supervising physician supervises in
17 accordance with the practice agreement authorized by the board;

18 (B) The alternate supervising physician has been designated as
19 such in the practice agreement authorized by the board; and

20 (C) The alternate supervisor only delegates those medical acts
21 that have been authorized by the practice agreement and are within
22 the scope of practice of both the primary supervising physician and
23 the alternate supervising physician.

24 (o) The supervising physician is responsible for observing,

1 directing and evaluating the work records and practices of each
2 physician assistant performing under his or her supervision. The
3 legal responsibility for any physician assistant remains with the
4 supervising physician at all times including occasions when the
5 physician assistant under his or her direction and supervision aids
6 in the care and treatment of a patient in a health care facility.
7 A supervising physician must designate an alternate supervising
8 physician, if the supervising physician is to be absent, but the
9 legal responsibility remains with the supervising physician at all
10 times. A health care facility is not legally responsible for the
11 actions or omissions of the physician assistant unless the physician
12 assistant is employed by or on behalf of the facility. Credentialed
13 medical facility staff and attending physicians of a hospital who
14 provide direction to or utilize physician assistants employed by or
15 on behalf of the hospital are considered alternate supervising
16 physicians as defined in subdivision (a) (2) of this section.

17 (p) A health care facility shall report, in writing to the
18 board within sixty days after the completion of the facility's
19 formal disciplinary procedure and after the commencement and
20 conclusion of any resulting legal action, the name of any physician
21 assistant practicing in the facility whose privileges at the
22 facility have been revoked, restricted, reduced or terminated for
23 any cause including resignation, together with all pertinent
24 information relating to the action. The health care facility shall

1 also report any other formal disciplinary action taken against any
2 physician assistant by the facility relating to professional ethics,
3 medical incompetence, medical malpractice, moral turpitude or drug
4 or alcohol abuse. Temporary suspension for failure to maintain
5 records on a timely basis or failure to attend staff or section
6 meetings need not be reported.

7 (g) When functioning as a physician assistant, the physician
8 assistant shall wear a name tag that identifies him or her as a
9 physician assistant. Identification shall be furnished by the board
10 upon licensure of the physician assistant. Physician assistants
11 licensed by this article shall keep their license and current
12 practice agreement(s) available for inspection at their primary
13 place of practice. A physician assistant shall notify the board in
14 writing of any termination of the practice agreement under which the
15 physician assistant is authorized to practice within ten days of the
16 termination. Failure of a physician assistant to provide written
17 notification to the board that an approved practice agreement has
18 terminated with the ten day time frame constitutes unprofessional
19 conduct and disciplinary proceedings may be instituted.

20 (r) The board shall promulgate rules pursuant to the provisions
21 of article three, chapter twenty-nine-a of this code governing the
22 eligibility and extent to which a physician assistant may prescribe
23 at the direction of his or her supervising physician. The rules
24 shall include, but not be limited to, the following:

1 (1) A list of drugs and pharmacologic categories, or both, the
2 prescription of which may not be delegated to a physician assistant,
3 including all drugs listed in Schedules I and II of the Uniform
4 Controlled Substances Act, antineoplastic and chemotherapeutic
5 agents, or both, used in the active treatment of current cancer,
6 radiopharmaceuticals, general anesthetics, radiographic contrast
7 materials and any other limitation or exclusions of specific drugs
8 or categories of drugs as determined by the board;

9 (2) Authority to include, in a practice agreement, the
10 delegation of prescribing authority for up to a seventy-two hour
11 supply of drugs listed under Schedule III of the Uniform Controlled
12 Substances Act so long as the prescription is nonrefillable and an
13 annual supply of any drug, with the exception of controlled
14 substances, which is prescribed for the treatment of a chronic
15 condition, other than chronic pain management with the chronic
16 condition being treated identified on the prescription; and

17 (3) A description of the education and training required for
18 a physician assistant to be eligible to receive delegated
19 prescriptive writing authority as part of a practice agreement.

20 (s) A supervising physician may delegate prescribing,
21 dispensing and administering of controlled substances, prescription
22 drugs or medical devices if the practice agreement includes:

23 (1) A notice of intent to delegate prescribing of controlled
24 substances, prescription drugs or medical devices;

1 (2) An attestation that all prescribing activities of the
2 physician assistant will comply with applicable federal and state
3 law governing the practice of physician assistants;

4 (3) An attestation that all medical charts or records will
5 contain a notation of any prescriptions written by a physician
6 assistant in accordance with this section;

7 (4) An attestation that all prescriptions written under this
8 section will include the physician assistant's name and the
9 supervising physician's name, business address and business
10 telephone number legibly written or printed; and

11 (5) An attestation that the physician assistant has
12 successfully completed each of the requirements established by the
13 board to be eligible to prescribe pursuant to a practice agreement
14 accompanied by the production of any required documentation
15 establishing eligibility.

16 (t) A supervising physician may enter into practice agreements
17 with up to five full-time physician assistants at any one time. A
18 physician is prohibited from providing supervision to greater than
19 five physician assistants at any one time, whether the supervision
20 is undertaken as a supervising physician or as an alternate
21 supervisor. However, a physician practicing medicine in an
22 emergency department of a hospital or a physician who supervises a
23 physician assistant who is employed by or on behalf of a hospital,
24 may provide supervision for up to five physician assistants per

1 shift if the physician has an authorized practice agreement in place
2 with the supervised physician assistant(s) or the physician has been
3 properly registered as an alternate supervising physician for each
4 physician assistant.

5 (u) A license issued to a physician assistant by the board
6 shall authorize the physician assistant to perform medical acts:

7 (1) Delegated to the physician assistant as part of an
8 authorized practice agreement;

9 (2) Appropriate to the education, training and experience of
10 the physician assistant;

11 (3) Customary to the practice of the supervising physician; and

12 (4) Consistent with the rules governing physician assistant
13 practice promulgated by the board.

14 (v) The provisions of this section do not authorize a physician
15 assistant to perform any specific function or duty delegated by this
16 code to those persons licensed as chiropractors, dentists, dental
17 hygienists, optometrists or pharmacists or certified as nurse
18 anesthetists. Nothing in this section limits the right of an
19 individual to practice a health occupation that the individual is
20 authorized to practice under this chapter.

21 (w) Each application for licensure, temporary licensure and
22 renewal of a license and each practice agreement submitted to the
23 board shall be accompanied by the appropriate fee as set by the
24 board.

1 (x) As a condition of renewal of physician assistant license,
2 which shall occur on a biennial basis on a schedule established by
3 the board, each physician assistant shall provide:

4 (1) Proof that the physician assistant is currently certified
5 and has been continuously certified during the preceding licensure
6 period by the National Commission on Certification of Physician
7 Assistants;

8 (2) An attestation that all continuing education requirements
9 established by the board for the reporting period have been met;

10 (3) A complete renewal application with supporting
11 documentation, including and required documentation of participation
12 in and successful completion of continuing education; and

13 (4) Payment of the appropriate fee.

14 (y) Notwithstanding any provision of this chapter to the
15 contrary, failure to timely submit a completed application, the
16 required documentation and the fee, or both, required for license
17 renewal shall result in the automatic expiration of any license as
18 a physician assistant.

19 (z) If a license is automatically expired and reinstatement is
20 sought within one year of the automatic expiration, the former
21 licensee shall provide:

22 (1) Proof that the physician assistant is currently certified,
23 and has been continuously certified during the preceding licensure
24 period, by the National Commission on Certification of Physician

1 Assistants;

2 (2) An attestation that all continuing education requirements
3 established by the board for the reporting period have been met;

4 (3) A complete reinstatement application with supporting
5 documentation, including and required documentation of participation
6 in and successful completion of continuing education; and

7 (4) Payment of a renewal fee plus a reinstatement fee equal
8 to fifty percent of the renewal fee.

9 (aa) If a license is automatically expired and more than one
10 year has passed since the automatic expiration, the former licensee
11 shall apply for a new license.

12 (bb) It is unlawful for any physician assistant to represent
13 to any person that he or she is a physician, surgeon or podiatrist.

14 A person who violates the provisions of this subsection is guilty
15 of a felony and, upon conviction thereof, shall be imprisoned in a
16 state correctional facility for not less than one nor more than two
17 years, or be fined not more than \$2,000, or both fined and
18 imprisoned.

19 **§30-3-16a. Special volunteer physician assistant license; civil**
20 **immunity for voluntary services rendered to**
21 **indigents.**

22 (a) There is established a special volunteer physician
23 assistant license for physician assistants retired or retiring from
24 the active practice of medicine who wish to donate their expertise

1 for the medical care and treatment of indigent and needy patients
2 in the clinic setting of clinics organized, in whole or in part, for
3 the delivery of health care services without charge. The special
4 volunteer physician assistant license shall be issued by the West
5 Virginia Board of Medicine to physician assistants licensed or
6 otherwise eligible for licensure under this article and the
7 legislative rules promulgated hereunder without the payment of an
8 application fee, license fee or renewal fee, and the initial license
9 shall be issued for the remainder of the licensing period, and
10 renewed consistent with the boards other licensing requirements.
11 The board shall develop application forms for the special license
12 provided in this subsection which shall contain the physician
13 assistant's acknowledgment that:

14 (1) The physician assistant's practice under the special
15 volunteer physician assistant license will be exclusively devoted
16 to providing medical care to needy and indigent persons in West
17 Virginia;

18 (2) The physician assistant will not receive any payment or
19 compensation, either direct or indirect, or have the expectation of
20 any payment or compensation, for any medical services rendered under
21 the special volunteer physician assistant license;

22 (3) The physician assistant will supply any supporting
23 documentation that the board may reasonably require; and

24 (4) The physician assistant agrees to continue to participate

1 in continuing education as required by the board for the special
2 volunteer physician assistant license.

3 (b) Any physician assistant who renders any medical service to
4 indigent and needy patients of a clinic organized, in whole or in
5 part, for the delivery of health care services without charge under
6 a special volunteer physician assistant license authorized under
7 subsection (a) of this section without payment or compensation or
8 the expectation or promise of payment or compensation, is immune
9 from liability for any civil action arising out of any act or
10 omission resulting from the rendering of the medical service at the
11 clinic unless the act or omission was the result of the physician
12 assistant's gross negligence or willful misconduct. In order for
13 the immunity under this subsection to apply, there must be a written
14 agreement between the physician assistant and the clinic pursuant
15 to which the physician assistant will provide voluntary
16 uncompensated medical services under the control of the clinic to
17 patients of the clinic before the rendering of any services by the
18 physician assistant at the clinic: *Provided*, That any clinic
19 entering into ~~such~~ a written agreement is required to maintain
20 liability coverage of not less than \$1 million per occurrence.

21 (c) Notwithstanding the provisions of subsection (b) of this
22 section, a clinic organized, in whole or in part, for the delivery
23 of health care services without charge is not relieved from imputed
24 liability for the negligent acts of a physician assistant rendering

1 voluntary medical services at or for the clinic under a special
2 volunteer physician assistant license authorized under subsection
3 (a) of this section.

4 (d) For purposes of this section, "otherwise eligible for
5 licensure" means the satisfaction of all the requirements for
6 licensure as listed in section sixteen of this article and in the
7 legislative rules promulgated thereunder, except the fee
8 requirements of subsection (n) of that section and of the
9 legislative rules promulgated by the board relating to fees.

10 (e) Nothing in this section may be construed as requiring the
11 board to issue a special volunteer physician assistant license to
12 any physician assistant whose license is or has been subject to any
13 disciplinary action or to any physician assistant who has
14 surrendered a physician assistant license or caused ~~such~~ the license
15 to lapse, expire and become invalid in lieu of having a complaint
16 initiated or other action taken against his or her license, or who
17 has elected to place a physician assistant license in inactive
18 status in lieu of having a complaint initiated or other action taken
19 against his or her license, or who has been denied a physician
20 assistant license.

21 (f) Any policy or contract of liability insurance providing
22 coverage for liability sold, issued or delivered in this state to
23 any physician assistant covered under the provisions of this
24 article, shall be read so as to contain a provision or endorsement

1 whereby the company issuing ~~such~~ the policy waives or agrees not to
2 assert as a defense on behalf of the policyholder or any beneficiary
3 thereof, to any claim covered by the terms of ~~such~~ the policy within
4 the policy limits, the immunity from liability of the insured by
5 reason of the care and treatment of needy and indigent patients by
6 a physician assistant who holds a special volunteer physician
7 assistant license.

8 (g) A physician assistant, licensed in this state or licensed
9 or authorized to practice in any other jurisdiction of the United
10 States or who is credentialed as a physician assistant by a federal
11 employer who is responding to a need for medical care created by an
12 emergency or a state or local disaster (not to be defined as an
13 emergency situation which occurs in the place of one's employment),
14 may render such care that the physician assistant is able to provide
15 without supervision as it is defined in this section, or with such
16 supervision as is available.

17 (1) Any physician who supervises a physician assistant
18 providing medical care in response to an emergency or state or local
19 disaster is not required to meet the requirements set forth in this
20 section for a supervising physician.

21 (2) A physician assistant, licensed in this state or licensed
22 or authorized to practice in other states of the United States who
23 voluntarily and gratuitously renders emergency medical assistance
24 other than in the ordinary course of employment or practice, is not

1 liable for civil damages or any personal injuries which result from
2 acts or omissions by those persons in rendering emergency care when
3 the physician assistant is acting in good faith and within his or
4 her education, training and experience. The immunity granted by
5 this section does not apply to acts or omissions constituting gross,
6 willful or wanton negligence or when the medical assistance is
7 rendered at any hospital, physician's office or other health care
8 delivery entity where those services are normally rendered.

9 (3) A physician who supervises a physician assistant
10 voluntarily and gratuitously providing emergency care as described
11 in this subsection, is not liable for civil damages for any personal
12 injuries which result from acts or omissions by the physician
13 assistant rendering emergency care.

14 (h) The board may grant a physician assistant, currently
15 licensed by the board who holds a license with no current
16 discipline, limitations or restrictions on any professional license
17 restrictions, and who has submitted a timely application on a form
18 prescribed by the board, a summer camp or volunteer endorsement to
19 provide services at a children's summer camp or volunteer services
20 for a public or community event. The board may grant no more than
21 one summer camp endorsement annually to licensees of the board. Any
22 summer camp or volunteer endorsement shall last for no more than one
23 specifically designated three week period annually. An application
24 fee may not be assessed for the endorsement for a licensee of the

1 board if the physician assistant is volunteering his or her services
2 to the camp without compensation or remuneration.

3 (i) The board may also grant a limited summer camp license to
4 any physician assistant, currently licensed or authorized to
5 practice in any other state, who has no current discipline,
6 limitations or restrictions on any professional license in any
7 jurisdiction, and who has submitted a timely application along with
8 documentation of current NCPPA certification, authorizing the
9 physician assistant to provide services at a children's summer camp
10 for no more than one specifically designated three week period
11 annually.

12 (j) To be eligible for a summer camp license or a summer camp
13 or volunteer endorsement, the physician assistant must apply in a
14 timely fashion and on a form prescribed by the board, and attest
15 that:

16 (1) The organizers of the summer camp and public or community
17 event have arranged for a supervising physician to be available as
18 needed to the physician assistant;

19 (2) The physician assistant will limit his or her scope of
20 practice to medical acts which are within his or her education,
21 training and experience; and

22 (3) The physician assistant will not prescribe any controlled
23 substances or legend drugs as part of his or her physician assistant
24 practice at the summer camp or public or community event.

NOTE: The purpose of this bill is to modernize the licensure and regulation of physician assistants by the West Virginia Board of Medicine. It permits physician assistant to obtain licensure prior to finding employment, prohibits physician assistants from practicing without an approved practice agreement on file with the board and authorizes physician assistants to practice in emergency situations and under volunteer licenses/endorsements. The bill does not modify in any way the established scope of practice for physician assistants.

Strike-throughs indicate language that would be stricken from the present law and underscoring indicates new language that would be added.

§30-3-16 has been completely rewritten; therefore, it has been completely underscored.